



**Consult and Challenge Meeting**  
**21<sup>st</sup> January 2015**  
**10:30 – 12:30**

**Whitworth Suite, Unity 12, 9-19 Rose Rd, Southampton SO14 6TE**

**PRESENT:** Becky Clegg, Chris Andrews, Clare Petrie, Kez Duxbury, Dawn Buck, Gill Fields, Karla Huggins, Julia Huggins, John McIntyre, James Marshall, Lise Marron, Margaret Russell, John Russell, Ray Harris, Robert Droy, Saqib Yasin, Steve Beal, Chris Beal, Alayne Kean (BSL Interpreter), Gordon Wade (Minutes), Will Rosie.

ITEM		ACTION
1.	<p><b><u>Introductions and Apologies for Absence</u></b>  <u>Apologies:</u> Richard Allen, Sam Goold, Sarah Parker</p>	
2.	<p><b><u>Agreeing the Minutes of the November Meeting</u></b>            Minutes agreed as an accurate record.</p>	
3.	<p><b><u>Matters to do with November Meeting</u></b>  <b>Item 3a:</b> Gordon to send the Welcome Pack out to all members was pending.</p>	<b>GW</b>
4.	<p><b><u>People's Panel – James Marshall</u></b>  <b>(SCC Communications and Research Manager)</b>            Referred to in the November Minutes (CCG Update) as the Citizens Panel – item 4c.            James agreed to attend the meeting to talk about of the People's Panel Project and to answer questions from Group members.            James explained the People's Panel will enable SCC and the CCG consult with Southampton residents to express opinions and views on Council and Health services. Results will be used on current services and help shape future decisions of the SCC and NHS. Citizens will be placed into discussion groups of the interest subject (health, housing, social care etc.) as indicated on their People's</p>	

	<p>Panel Sign-Up application form (applicants must be 18 or over). There will be regular contact (from SCC / CCG) with ‘members’. Fortnightly ‘testing’ questions will be put out for an opinion. During the year, six longer surveys will take place – different ones for the different Groups.</p> <p>James spoke of building discussion groups ‘online’ and establishing a 2-way framework.</p> <p>Dawn mentioned that with the People’s Panel being a joint project, the CCG will have their own consultation groups.</p> <p>It is hoped to have at least 1000 and not more than 3000 Southampton people signed-up to be engaged in the project.</p> <p>Recruitment is underway. Dawn/James also brought along copies the People’s Panel Sign up survey Form which was distributed around the meeting and also for C&amp;C members and to circulate within their focus groups.</p> <p>James explained SCC/CCG wanted the Panel to cover a broad range of people; hard to reach/seldom heard groups, also gaining links with active groups (such as C&amp;C).</p> <p>James also spoke of the involvement of Southampton University in the project by using the theory of Citizens Social Science to analyse results of surveys from large public opinion groups!</p> <p>From other items discussed; there was some concern that telephone numbers were not asked for on the Sign Up forms – which James noted. Not everyone wanted to make public the mobile telephone number asked for.</p> <p>Will spoke of eventually developing coproduction in the infrastructure. He asked James if he knew of other Groups who use coproduction. James was unable to answer directly, but would develop coproduction eventually.</p>	
<p><b>5.</b></p> <p><b>a.</b></p> <p><b>b.</b></p> <p><b>c.</b></p>	<p><b><u>Healthwatch (Sam Goold, Community Development)</u></b></p> <p>Sam Goold was unable to attend the meeting due to a prior Outreach event, but had emailed Will an overview of Healthwatch recent events.</p> <p>Healthwatch had spent the previous week supporting the CCG in their public Campaign, ‘Think First’ and ‘Phone First’ and involved promoting MIU and other Service Centres. Sam was also seen interviewed on the BBCtv South Today programme.</p> <p>The issue of people being turned away due to not having any ID is now being looked at by the Equality and Human Right Commission.</p>	

<p>d.</p> <p>e.</p> <p>f.</p> <p>g.</p> <p>h.</p>	<p>Robert mentioned that GP's are not refusing people. It's the laid down guidelines. GP receptionists have to see photographic evidence as part of the procedure. Clearer guidance is needed.</p> <p>Steve asked if the A&amp;E and MIU can refuse treatment to a person not registered with a GP. Dawn would clarify the official position and report the answer for inclusion in the minutes*.</p> <p>Mentioned was also made about any follow-up procedure via GP following treatment, if a person was not registered.</p> <p>*In a follow-up email from Dawn the official position is: A person who attends A&amp;E, MIU, or Walk-in Centre would not be refused treatment, but they should be advised to register with a GP.</p> <p>Healthwatch launched a 'Healthy Selfie' promotion in January. The idea being that people photograph themselves doing healthy activities! Resulting pictures would be gratefully received, ideally through 'Twitter' including the tag, #HealthySelfieSoton, and would be 'retweeted' by Healthwatch.</p> <p>Sam met with the Solent Health Trust who run community services and services at the RSH. He helped contribute to the patient experience of people involved in this. Sam also met with the Children's Hospital and General Hospital to support them with their plans on this subject.</p> <p>The Healthwatch Strategic Group had met the previous week and Primarily discussed Personal Health Budgets that are now available. These are likely to become more important in the future giving people more choice and control over their health care.</p> <p>Will spoke of the advantages of having Solicitor, Paula Barnes, as a Healthwatch member. This is especially useful with such items as the eligibility rules surrounding Personal Health Budgets (PHB). Will outlined some concerns raised by Paula, about changes to PHB entitlements and the level of budgets available for the PHB's</p> <p>Robert believed there was nothing different about these changes to how PHB work. It was just a different way of delivering the service of what people already get.</p>	
<p>5.</p> <p>a.</p>	<p><b><u>Coproduction as a Product</u></b></p> <p>Will reported on a workshop held by a sub-group of C&amp;C just before Christmas to discuss the Group providing a Coproduction Facility Service.</p> <p>The 5-step model of coproduction developed by Carers Together was used as a guide.</p>	

	<p>The workshop highlighted a missing step within this guide - the process; the 'definition' of a project that is intended to have coproductive elements. It was identified as where C&amp;C should be focussing its attention in the future. The Care Act was used as an example of where there may be changes to services. The term Horizon Scanning was used (for the definition stage) – looking at issues and asking organisations how we could help delivering services.</p> <p>b. Will, Richard and Ray have met with Sandy Jerrim (Integrated Commissioning Unit) to discuss how coproduction could be used in the future.</p> <p>c. Dawn raised the subject of confidentiality and coproduction; especially so where horizon scanning on proposed projects was concerned. The CCG Commissioners would have to be convinced that information will not be leaked. Having 'lay-people' in the decision making is 'new territory' of and could be a barrier to progress. The CCG would certainly need assurances. Dawn pointed out that in her dealings with SCC, the CCG have certainly been more forward thinking in regards to service user involvement. Will spoke of C&amp;C building a trustworthy relation with the CCG and the signing of a Confidentiality Agreement. This would be key at the definition stage. C&amp;C had already been involved with the Procurement and MIU Projects. Dawn suggested that C&amp;C mention this in an Annual report of work done through the year. It was agreed to continue to develop the Coproduction Facility Service.</p> <p>d. Healthwatch are running some training workshops on learning how the NHS chooses and buys services. There are still places on these workshops, and if you want to go along, please see the letter attached to these minutes for contact details.</p>	
<p>6. a.</p>	<p><b><u>Clinical Commissioning Group (CCG) Update – Dawn Buck</u></b></p> <p>The CCG had held a series of Road-shows around the Southampton area to promote their Winter Campaign programme and the health services available to people. This included the promoting the facilities provided by the MIU, the use of telephoning 111 and how Pharmacies can help on health issues.</p>	

<p>b.</p>	<p>Ray Harris mentioned that he had seen the adverts on Meridian TV about Pharmacy provision and was impressed that they were not just being shown on the odd occasion, but every day.</p> <p>The CCG will evaluate the exercise at the end of February.</p> <p><b>Primary Care Co-commissioning:</b>  NHS England is currently responsible for all Primary Care Services, where-as the Clinical Commissioning Groups are GP led.</p> <p>Recently, NHS England invited CCGs to come forward with expressions of interest to take on an increased role in the commissioning of primary care services. The intention being to enable CCGs to improve primary care services locally for the benefit of patients and local communities.</p> <p>CCG's have been given three options with this proposal;</p> <ol style="list-style-type: none"> <li>1. Keep things as they are</li> <li>2. Joint commissioning, but accountable to NHS England</li> <li>3. CCGs to take control of all Primary Care Services.</li> </ol> <p>The Southampton CCG have decided to accept option 2 for the first year; learn from the experience and consider whether to take full authority in year 2.</p> <p>Healthwatch will also be involved in this.</p>	
<p>7. a.  b.</p>	<p><b><u>SCC Update</u></b></p> <p>Will reminded the meeting that the SCC Implementation Board had disbanded. In a restructure of the Transformation Programme, three new groups have been formed: Customer Pillar, Service Delivery and Infrastructure.</p> <p>Will has been invited by SCC to join the Customer Pillar as a Healthwatch member and attended his first meeting. However, since then SCC have decided to put a hold on service user/voluntary sector/Healthwatch until a strategy on how to involve these groups across the whole of the Transformation Programme has been worked out.</p> <p><b>Online Portal</b></p> <p>The online portal project had now concluded.</p> <p>The meeting discussed the residual of funding from the work and what to do with it, or could it be used for.</p> <p>Will to consider the idea of suggesting to SCC that C&amp;C get involved with some training for people to use the online Portal.</p>	

<p><b>c.</b></p>	<p><b>Proposed SCC Budget.</b>  Will had attended invited public Council meeting with members of the Cabinet present to discuss the state of the budget and the finances of the City. Those invited represented the Third Sector. Will was a little concerned about invitees turning the meeting towards single-issues complaints and made known SPECTRUM's preference to work in a co-supportive way.  Leader of the Council, Simon Letts, gave an idea of the way the Government spending cuts have and will hit SCC. By 2017 Southampton will have half the budget they had in 1999. Simon spoke of the Council looking for ways of raising additional money through investment and exploiting the city's Unique Selling Points.</p>	
<p><b>8.</b> <b>a.</b>  <b>b.</b>  <b>c.</b></p>	<p><b><u>Any Other Business</u></b>  CCG have launched their new website. This had actively involved coproductive involvement with C&amp;C.  Dawn spoke of 'user testing' and wished to hear from anybody who would like to be involved.  The meeting briefly discussed the financial security of the C&amp;C Group. <b>Will explained that the group could continue in its current format until December 2015, but would provide a more succinct picture at the next meeting.</b>  Link for CCG Comms and Engagement Meeting Minutes:-  <a href="http://www.england.nhs.uk/ourwork/patients/accessibleinfo-2/">http://www.england.nhs.uk/ourwork/patients/accessibleinfo-2/</a></p>	<p><b>WR</b></p>
	<p><b><u>Date of Next Meeting: Wednesday, 18th February 2015</u></b></p>	